



INDIVIDUAL RESPONSIBILITY PLAN (IRP)

TRAINING:
FULL-TIME BASIC EDUCATION (BE, ES, GE, or HS)

I will participate full-time in WorkFirst Basic Education training from the provider listed below at the address listed below for the time period listed below. I will attend all scheduled meetings and classes, complete all required assignments, and participate to the best of my ability. If I cannot attend class, I will call the contact person listed below at the number listed below on or before the same day and explain why I cannot come in. I understand that if I do not call in on the same day, it will be considered an unexcused absence and that two unexcused absences in a month may result in sanction. I have adequate child care and transportation has been addressed, and these are not an issue. My case manager and I will review this IRP again on the date listed below.

- ☐ I am getting the training from a community or technical college, so I am also required to turn in weekly attendance sheets to the college and meet quarterly with my WorkFirst college coordinator to review my grades and progress in the class.
- ☐ Basic education
- ☐ GED/high school completion
- ☐ Family literacy
- ☐ English as a Second Language

Provider: _____

Address: _____

Begin and end date of services: _____

Contact name: _____

Phone number: _____

Date of next IRP review: _____